



## Bayside Garden Center

### Donation Request Questionnaire

Thank you for thinking of Bayside Garden Center for your event or organization! We receive many donation requests throughout the year and use the information below to help us understand each opportunity and distribute our support thoughtfully throughout the community.

Please complete the following questionnaire and return it to us along with any additional information you feel would be helpful.

#### Organization Information

**Organization Name:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Website/Social Media:** \_\_\_\_\_

**Is your organization a nonprofit or tax-exempt organization?**

☐ Yes

☐ No

☐ Other: \_\_\_\_\_

**EIN / Tax ID Number:** \_\_\_\_\_

**Tax-exempt status, if applicable:**

☐ 501(c)(3)

☐ Other: \_\_\_\_\_

**If applicable, please provide a copy of your IRS determination letter or other documentation confirming your tax-exempt status.**

**What is your organization's primary purpose or mission?**

#### Event Information

**Name of Event:** \_\_\_\_\_

**Date of Event:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Approximately how many people do you expect to attend?**

\_\_\_\_\_

**Who is the event primarily serving?**

- ☐ General community
- ☐ Children/youth
- ☐ Families
- ☐ Seniors
- ☐ Veterans
- ☐ Individuals/families experiencing financial hardship
- ☐ Schools/students
- ☐ Other: \_\_\_\_\_

**Is your organization or event open and accessible to the general public, or is participation limited to members, residents, clients, or another specific group?**

- ☐ Open to the general public
- ☐ Primarily serves a specific group
- ☐ Membership-based organization
- ☐ Residential/facility-based organization
- ☐ Other: \_\_\_\_\_

**If participation is limited to a specific group, please describe who is served:**

**Briefly describe the event and how the funds raised will be used:**

Your Request

**What are you requesting from Bayside Garden Center?**

- ☐ Gift certificate/gift card
- ☐ Product donation
- ☐ Plants/flowers
- ☐ Sponsorship
- ☐ Raffle/auction item
- ☐ Other: \_\_\_\_\_

**If requesting a specific item or dollar amount, please describe it:**

**How will the donation be used?**

- ☐ Raffle
- ☐ Silent/live auction
- ☐ Door prize
- ☐ Event activity
- ☐ Directly supporting the organization
- ☐ Other: \_\_\_\_\_

## Community Impact

**Approximately how many people will directly benefit from the funds or donation?**

**How does this event or organization benefit the broader community?**

**If this is a fundraising event, what will the funds raised support?**

## Recognition & Promotion

If Bayside Garden Center contributes to your event, how will our support be recognized?

- ☐ Event signage
- ☐ Social media recognition
- ☐ Printed/event program
- ☐ Website recognition
- ☐ Verbal recognition at event
- ☐ Other: \_\_\_\_\_

**Please provide any additional information about the event, organization, or sponsorship opportunity that you would like us to consider:**

**Thank You!**

We appreciate the work that local organizations do in our community. While we would love to support every request, our donation budget is limited and we are not able to fulfill every request we receive. Completing this form does not guarantee a donation.

Thank you for giving us the opportunity to learn more about your organization and the work you do in our community!

**Bayside Garden Center**

Bayside, Wisconsin